

SPECIFICATION CHANGE NOTICE (SCN)				1. DATE (YYMMDD)		Form Approved OMB No. 0704-0188	
Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES, RETURN COMPLETED FORM TO THE GOVERNMENT ISSUING CONTRACTING OFFICER FOR THE CONTRACT/PROCURING ACTIVITY NUMBER LISTED IN ITEM 2 OF THIS FORM.						2. PROCURING ACTIVITY NO.	
						3. DODAAC	
4. ORIGINATOR				5. SCN TYPE			
a. TYPED NAME (First, Middle Initial, Last)				<input type="checkbox"/> PROPOSED <input type="checkbox"/> APPROVED			
b. ADDRESS (Street, City, State, Zip Code)				6. CAGE CODE		7. SPEC NO.	
				8. CAGE CODE		9. SCN NO.	
10. SYSTEM DESIGNATION		11. RELATED ECP NO.		12. CONTRACT NO.		13. CONTRACTUAL AUTHORIZATION	
14. CONFIGURATION ITEM NOMENCLATURE				15. EFFECTIVITY			
This notice informs recipients that the specification identified by the number (and revision letter) shown in Item 7 has been changed. The pages changed by this SCN are those furnished herewith and carry the approval date of the related ECP listed in Item 11. The pages of the page numbers and dates listed in Items 16 and 17, combined with non-listed pages of the original issue of the revision shown in item 7, constitute the current approved version of this specification.							
16. PAGES AFFECTED BY THIS SCN						TYPE OF CHANGE*	
PAGE(S) a.						b.	
17. SUMMARY OF PREVIOUSLY CHANGED PAGES						APPROVAL DATE	
SCN NO. a.	RELATED ECP NO. b.	PAGE(S) c.	DATE SUBMITTED (YYMMDD) d.	TYPE OF CHANGE* e.	c.		
* "S" indicates supersedes earlier page "A" indicates added page "D" indicates deletion							
18.a. GOVERNMENT ACTIVITY			c. SIGNATURE			d. DATE SIGNED (YYMMDD)	
b. TYPED NAME (First, Middle Initial, Last)							